

DECLARATION
FOR UTILITY OR DESIGN
PATENT APPLICATION

☒ Declaration Submitted With Initial Filing ☐ Declaration Submitted After Initial Filing

) Attorney Docket No.: 70496
)
) First Named Inventor: David Jenkins
)
)
) Application Number:
)
) Filing Date: HEREWITH
)
) Group Art Unit:
)
) Examiner Name:

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MEDICAL IMPLANT FOR ELECTROSTIMULATION
USING DISCRETE MICRO-ELECTRODES

(Title of Invention)

the specification of which:

(X) is attached hereto, or

() was filed by an authorized person on my behalf on _____ (Date)
as United States Application Number _____
or PCT International Application Number _____
and was amended on _____ (if applicable).
(Date)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below, and I have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application, on this invention filed by me or my legal representatives or assigns and having a filing date before that of the application on which priority is claimed:

Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

<u>Provisional Application Number(s)</u>	<u>Provisional Application Filing Date</u>
60/181,320	February 9, 2000
60/249,096	November 15, 2000
60/249,654	November 17, 2000

☐ Additional provisional application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120, of any prior United States application(s), or under §365(c) of any PCT international application(s) designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose all information known by me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

<u>Prior U.S. Application Number</u>	<u>Prior PCT International Application Number</u>	<u>Filing Date of U.S. or PCT International Application</u>	<u>Patent Number (if applicable)</u>

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet attached hereto.

As a named inventor, I hereby appoint the practitioners associated with Customer Number 22242, with full power of substitution and revocation, to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, and request that all correspondence and telephone calls in respect to this application be directed to FITCH, EVEN, TABIN & FLANNERY, Suite 1600, 120 South LaSalle

Street, Chicago, Illinois 60603-3406, Telephone No. (312) 577-7000,
Facsimile No. (312) 577-7007, CUSTOMER NUMBER 22242.



I hereby declare that all statements made herein of my own knowledge are true, and that all statements made herein on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity or enforceability of the application or any patent issued thereon.

Full name of sole or one
joint inventor:

David Jenkins
(Given names first, with Family name last)

Inventor's signature:

Date:

Residence:

Flanders, New York
(City and State for U.S. Residents;
City and Country for others)

Post Office Address:

17 Bennington Drive
Flanders, NY 07836

Citizenship:

United States

Full name of sole or one
joint inventor:

Pat Gordon
(Given names first, with Family name last)

Inventor's signature:

Date:

Residence:

Wayzata, Minnesota
(City and State for U.S. Residents;
City and Country for others)

Post Office Address:

494 Highcroft Road
Wayzata, MN 55391

Citizenship:

United States

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) or Patentee(s): Jenkins et al.
Application No. or Patent No.:
Filed or Issued: HERewith
For: MEDICAL IMPLANT FOR
ELECTROSTIMULATION USING
DISCRETE MICRO-ELECTRODES

Group Art Unit:

Examiner:

**VERIFIED STATEMENT (DECLARATION) CLAIMING
SMALL ENTITY STATUS (37 C.F.R. §§1.9(f)
and 1.27(c)) - SMALL BUSINESS CONCERN**

I hereby declare that I am:

- () the owner of the small business concern identified below:
(X) an official of the small business concern empowered to act on
behalf of the concern identified below:

NAME OF CONCERN TRANSNEURONIX, INC.
ADDRESS OF CONCERN 100 Stierli Court, Suite 106
Mt. Arlington, NJ 07856

I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 37 C.F.R. §1.9(d) and in 13 C.F.R. Part 121 to be eligible for reduced patent fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons, and that the concern has not assigned, granted, conveyed or licensed (and is under no obligation to do so) any rights in the invention to any person who made it and could not be classified as an independent inventor, or to any concern which would not qualify as a non-profit organization or a small business concern under 13 C.F.R. §121.802. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled MEDICAL IMPLANT FOR ELECTROSTIMULATION USING DISCRETE MICRO-ELECTRODES by inventor(s) David Jenkins and Pat Gordon described in:

- (X) the specification filed herewith.
() application number / , filed .
() Patent No. , issued .

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 C.F.R. §1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 C.F.R. §1.9(d) or a nonprofit organization under 37 C.F.R. §1.9(e).

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 C.F.R. §1.27)

Full Name _____
 Address _____
☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

Full Name _____
 Address _____
☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

Full Name _____
 Address _____
☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 C.F.R. §1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING	<u>David Jenkins</u>
TITLE OF PERSON IF OTHER THAN OWNER	<u>President</u>
ADDRESS OF PERSON SIGNING	<u>100 Stierli Court, Suite 106</u> <u>Mt. Arlington, NJ 07856</u>
SIGNATURE	_____
DATE	_____

DECLARATION
FOR UTILITY OR DESIGN
PATENT APPLICATION

) Attorney Docket No. 70496
)
) First Named Inventor: David Jenkins
)
)
) Application Number: 09/777,979
)
) Filing Date: February 6, 2001
)
) Group Art Unit: 3762
)
) Examiner Name:

☐ Declaration Submitted With Initial Filing
☒ Declaration Submitted After Initial Filing

As a below named inventor, I hereby declare that:

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() is attached hereto, or

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or PCT International Application Number _____
and was amended on _____ (if applicable).
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Street, Chicago, Illinois 60603-3406, Telephone No. (312) 577-7000,
Facsimile No. (312) 577-7007, CUSTOMER NUMBER 22242.



I hereby declare that all statements made herein of my own knowledge are true, and that all statements made herein on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity or enforceability of the application or any patent issued thereon.

Full name of sole or one joint inventor:

David Jenkins
(Given names first, with Family name last)

Inventor's signature:

David Jenkins

Date:

May 9, 2001

Residence:

Flanders, New Jersey
(City and State for U.S. Residents;
City and Country for others)

Post Office Address:

17 Bennington Drive
Flanders, NJ 07836

Citizenship:

United States

Full name of sole or one joint inventor:

Pat Gordon
(Given names first, with Family name last)

Inventor's signature:

Pat Gordon

Date:

14 May 2001

Residence:

Wayzata, Minnesota
(City and State for U.S. Residents;
City and Country for others)

Post Office Address:

494 Highcroft Road
Wayzata, MN 55391

Citizenship:

United States

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) or Patentee(s): Jenkins et al.
Application No. or Patent No.: 09/777,979
Filed or Issued: February 6, 2001
For: MEDICAL IMPLANT FOR
ELECTROSTIMULATION USING
DISCRETE MICRO-ELECTRODES
Group Art Unit: 3762
Examiner:

VERIFIED STATEMENT (DECLARATION) CLAIMING
SMALL ENTITY STATUS (37 C.F.R. §§1.9(f)
and 1.27(c)) - SMALL BUSINESS CONCERN

I hereby declare that I am:

- () the owner of the small business concern identified below:
(X) an official of the small business concern empowered to act on
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NAME OF CONCERN TRANSNEURONIX, INC.
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- () the specification filed herewith.
(X) application number 09/777,979, filed February 6, 2001
() Patent No. _____, issued _____

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 C.F.R. §1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 C.F.R. §1.9(d) or a nonprofit organization under 37 C.F.R. §1.9(e).

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Full Name _____
 Address _____
☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

Full Name _____
 Address _____
☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

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 Address _____
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING

Paul A. Jones

TITLE OF PERSON IF OTHER THAN OWNER

ADDRESS OF PERSON SIGNING

100 Stierli Court, Suite 106
Mt. Arlington, NJ 07856

SIGNATURE

DATE

RECORDATION FORM COVER SHEET
PATENTS ONLY

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

David Jenkins
Pat Gordon

Additional name(s) of conveying party(ies) attached?

☐ Yes ☒ No

2. Name and address of receiving party(ies)

Name: TRANSNEURONIX, INC.

Internal Address: _____

Street Address: 100 Stierle Court, Suite 106City: Mount Arlington State: NJ Country: _____ ZIP: 07856Additional name(s) & address(es) attached? ☐ Yes ☒ No

3. Nature of conveyance:

☒ Assignment☐ Merger☐ Security Agreement☐ Change of Name☐ Other _____Execution Date: May 9 & 14, 2001

Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is: _____

A. Patent Application No.(s)

B. Patent No.(s)

09/777,979Additional numbers attached? ☐ Yes ☒ No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Richard A. KabaInternal Address: FITCH, EVEN, TABIN & FLANNERYStreet Address: 120 S. LaSalle Street, Suite 1600City: Chicago State: IL ZIP: 60603-34066. Total number of applications and patents involved: 17. Total Fee (37 CFR 3.41) \$ 40.00☒ Enclosed☒ Authorized to be charged to deposit account
only if check is Missing or improper

8. Deposit Account No.

06-1135

DO NOT USE THIS SPACE

9. Statement and signature

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Richard A. Kaba

Name of Person Signing

 SignatureMay 22, 2001

Date

Total number of pages including cover sheet, attachments, and document: 3

ASSIGNMENT

We, David A. Jenkins, residing at 17 Bennington Drive, Flanders, New Jersey 07836 and Pat Gordon, residing at 494 Highcroft Road, Wayzata, Minnesota 55391, for good and valuable consideration, receipt of which is hereby acknowledged, have assigned and do hereby assign to TRANSNEURONIX, INC., a Louisiana corporation, of 100 Stierli Court, Suite 106, Mt. Arlington, New Jersey 07856, United States of America, its successors, assigns and legal representatives, the entire right, title and interest in and to all subject matter invented by me and disclosed in in an application for Letters Patent of the United States and bearing U.S. Patent Application No. 09/777,979 entitled:

**MEDICAL IMPLANT FOR ELECTROSTIMULATION
USING DISCRETE MICRO-ELECTRODES**

executed by us on the date indicated below, and in and to all Letters Patent and all Convention and treaty rights of all kinds, in all countries throughout the world, for all such subject matter. We agree to sign all documents necessary to secure all said Letters Patent and rights and request issuance of all said Letters Patent to the above Assignee in accordance with this Assignment.

Date: May 9, 2001

David A. Jenkins
DAVID A. JENKINS

Date: 14 May 2001

Pat Gordon
PAT GORDON

State of New Jersey)
County of Morris) SS

I hereby certify that before me at Summit Bank
in the County of Morris and State of New Jersey, USA
personally appeared DAVID A. JENKINS, ^(WJCL) personally known by me,
who then and there was duly sworn by me and under oath
acknowledged that the foregoing Assignment was duly signed,
sealed and delivered by him.

May 9th, 2001

C. Cheryl A. Paradiso
Notary Public - My Commission
Expires 9/7/2005

CHERYL A. PARADISO
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires Sept 7, 2005

State of Minnesota)
County of Hennepin) SS

I hereby certify that before me at Anchor Bank N.A.
in the County of Hennepin and State of ~~New Jersey~~ ^{MINNESOTA}, USA
personally appeared PAT GORDON, personally known by me, who
then and there was duly sworn by me and under oath acknowledged
that the foregoing Assignment was duly signed, sealed and
delivered by him.

May 14, 2001

Rosalie M. Patnode
Notary Public - My Commission
Expires 1-31-05

